

DIVER/NON-DIVER INSIDE TENDER QUALIFICATION

NAME _____ RATE _____

Division _____ Date Commenced _____

1. Purpose. To record certification signatures by designated qualifiers who, by their signature, certify the prospective Inside Tender, has attained the knowledge and skill level required to perform as an Inside Tender.

2. Instructions: It is the responsibility of the Recompression Chamber Supervisor (RCC Sup), Diving Medical Tech (DMT), Amphibious Reconnaissance Corpsman (ARC) and Division Master Diver (MDV) to evaluate and recommend an individual to the Department Head and Commanding Officer for final approval as an Inside Tender. This qualification has specific signatures for High-Risk Core Unique Instructor Training.

* Non-Diving Personnel must complete the entire PQS, Divers must complete 3d-4d and 5b-5G, DMT/ARC must complete 3d-3f and 5a-5G.
* ARC may sign in place of DMT.

3. Prerequisites

a. Non-Diving Personnel must complete 2C Basic Diving Medicine and the Dive Medicine for Medical Personnel (DMMP) curriculum with passing exam grades.

2C BDM Score: _____

DMMP Score: _____

MDV/Date

b. Successfully pass a Pressure Test.

RCC Sup or DMT/Date

c. Conformance to Navy Physical Standards.

DMT/Date

Enclosure (2)

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d. Have a current Dive Physical.

DMT/Date

e. Have a current CPR card.

DMT/Date

f. Basic Diving Systems Qualification

QA Officer/Date

4. Fundamentals. To obtain a signature, the Trainee must discuss and exhibit their expertise on the subject.

a. Discuss the signs, symptoms and treatments for the following:

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|--|------------------------------|
| (1) Gas Embolism. | _____
RCC Sup or DMT/Date |
| (2) Type I DCS. | _____
RCC Sup or DMT/Date |
| (3) Type II DCS. | _____
RCC Sup or DMT/Date |
| (4) Carbon Monoxide Poisoning. | _____
RCC Sup or DMT/Date |
| (5) Pulmonary Overinflation Syndromes. | _____
RCC Sup or DMT/Date |
| (6) Pneumothorax and Tension Pneumothorax. | _____
RCC Sup or DMT/Date |
| (7) Dehydration. | _____
RCC Sup or DMT/Date |

- | | |
|--|---------------------|
| (8) Heat Stress and Heat Stroke. | _____ |
| | RCC Sup or DMT/Date |
| (9) Barotrauma. | _____ |
| | RCC Sup or DMT/Date |
| (10) Shock. | _____ |
| | RCC Sup or DMT/Date |
| (11) Hypothermia and Hyperthermia. | _____ |
| | RCC Sup or DMT/Date |
| (12) CNS/Pulmonary O2 Toxicity. | _____ |
| | RCC Sup or DMT/Date |
| (13) Alternobaric Vertigo/Caloric Vertigo. | _____ |
| | RCC Sup or DMT/Date |
| (14) CO2 Toxicity. | _____ |
| | RCC Sup or DMT/Date |
| (15) Recurrence of Symptoms (both during and after treatment). | _____ |
| | RCC Sup or DMT/Date |

b. Discuss normal vital signs and what they are.

RCC Sup or DMT/Date

c. Discuss all treatment tables.

MDV/Date

d. Discuss applicable EPs for while inside all of NDSTC's Recompression chambers.

MDV/Date

5. Practical Factors. To obtain a signature, the Trainee must successfully complete the specific line item.

a. Complete a medical record screening for Diving Duty. (Only Medical Personnel need to complete this step)

DMT/Date

b. Demonstrate the ability to start, maintain and discontinue an IV on a patient.

(1) IV on the surface.

DMT/Date

(2) IV at depth not to exceed 165fsw.

DMT/Date

c. Demonstrate the ability to start, maintain and discontinue a urinary catheter on a manikin.

DMT/Date

d. Inventory and discuss the contents of a Chamber Kit.

DMT/Date

e. Perform three neurological examinations, one for a Master Diver, and two for a Diving Medical Tech or Chamber Supervisor.

(1) Neurological Exam on surface.

RCC Sup or DMT/Date

(2) Neurological Exam at depth not to exceed 165fsw.

RCC Sup or DMT/Date

(3) Neurological Exam on surface.

MDV/Date

f. Perform as inside tender for diving casualty scenarios.

(1) Chamber Scenario.

RCC Sup or DMT/Date

(2) Chamber Scenario.

RCC Sup or DMT/Date

(3) Chamber Scenario.

MDV/Date

g. Demonstrate Inside Tender proficiency by passing a written exam for Inside Tender.

Test Administrator/ Date

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FIRST ENDORSEMENT

(Name) _____ is recommended for designation as Inside Tender.

Training Officer/Date

Approved: _____
Commanding Officer

Copy to:
CISO